# DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

#### PUBLIC HEALTH SERVICE

## CENTER FOR DISEASE CONTROL Atlanta, Georgia

#### SUMMARY MINUTES OF MEETING

October 5-6, 1977

The Immunization Practices Advisory Committee met in Atlanta, Georgia, October 5-6, 1977. Those participating in the meeting are listed below:

# COMMITTEE MEMBERS PRESENT

Dr. E. Russell Alexander (October 5)

Dr. Suzanne E. Dandoy

Dr. H. Bruce Dull, Executive Secretary

Dr. William R. Elsea

Dr. Edwin D. Kilbourne (October 6)

Dr. Reuel A. Stallones

Dr. Thomas M. Vernon

# COMMITTEE MEMBERS ABSENT (EXCUSED)

Dr. Lonnie S. Burnett (resigned)

## Ex-officio Members Present

Dr. William Jordan

Dr. James Hill (for Dr. Jordan Oct. 5) National Institute of Allergy and Infectious Diseases, NIH

Dr. Harry Meyer, Jr.

Dr. John Robbins (for Dr. Meyer Oct. 5) Bureau of Biologics, Food and Drug Administration

### Liaison Members Present

Dr. Stanley Akers (for Dr. John Abbatt) Laboratory Centre for Disease Control

Dr. Asher Finkel

American Medical Association

Dr. Edward A. Mortimer (for Dr. Martha Yow), American Academy of Pediatrics

#### GUEST

Dr. Robert Austrian University of Pennsylvania

#### CENTER FOR DISEASE CONTROL

## Bureau of Epidemiology

Dr. John Bryan

Dr. Roger Feldman Dr. David Fraser

Dr. Karl Kappus

Dr. Lawrence Schonberger

Dr. Ted Tsai

Dr. William Winkler

## Bureau of Laboratories

Dr. Alan Kendal.

Dr. Joseph McDade

Dr. Gary Noble

Dr. Charles Shepard

### Bureau of State Services

Dr. Robert Craven

Dr. Neal Halsey

Dr. Alan Hinman

## Bureau of Smallpox Eradication

Mr. Jim Hicks

Dr. Michael Lane

#### OBSERVERS

Wayne Johnson Leon Washut

Merck, Sharp & Dohme

The meeting was called to order at 8:30 a.m. on October 5, 1977, by the Executive Secretary, acting as Temporary Chairman for purposes of announcements; introduction of Dr. Suzanne Dandoy, newly appointed Committee member; notification of the resignation of Dr. Lonnie Burnett; and calling for the Committee to select current meeting chairperson. In this regard, the Committee suggested that two senior members serve as co-chairmen, namely Drs. Reuel Stallones and William Elsea.

The revised agenda was followed by the Chairmen, who served at various times in the meeting. Updated (September-October 1977) drafts of all ACIP recommendations had been provided to the Committee members and were reviewed individually for wording changes and reaffirmation of currentness. Each of the drafts had previously been reviewed at least once, and in many cases on several occasions, by the Committee--most of them as recently as May 1977.

Reviews proceeded systematically, and there were essentially no content changes. Efforts were directed primarily toward clarification and expansion for purposes of widest understanding and applicability. In some few instances, members of the Committee, either working independently or in small groups, drafted alternative sentences or sections which more clearly stated the group's recommendation. These in turn were reviewed when available and were either further modified or accepted for inclusion in the final versions.

# Pneumococcal Polysaccharide Vaccine

The draft statement on Pneumococcal Polysaccharide Vaccine prepared for the May 1977 meeting and modified at that time was the subject of more discussion than any other single statement. This was largely because the Committee reviewed with Dr. Robert Austrian, a guest at the meeting, his analysis of evidence on the extent of pneumococcal disease in the United States and on the effectiveness of vaccine for potential recipients. In summary the Committee's view is that the vaccine had been shown effective under some circumstances and likely could be expected to be effective under others. However, it plans to indicate that the vaccine's initial uses (once it is licensed and available), although reasonably clear in concept, should be targeted toward clearly high-risk persons and should involve controlled observations and careful surveillance to further document protection and benefit. The Committee was especially concerned that there not be unjustifiable uses and that the public health importance of the vaccine be demonstrated prior to any wide scale implementation.

## Rocky Mountain Spotted Fever Vaccine

Rocky Mountain Spotted Fever (RMSF) vaccine is being phased out as a result of recommendations to the Bureau of Biologics based on only partial effectiveness. Therefore the Committee suggested that its own statement on RMSF vaccine use not be republished and that through CDC's regular communications with State health departments, the product's unavailability be indicated and that practicing physicians in turn be made aware. (Incidentally, it was noted that some research and developmental efforts are being directed toward a new RMSF vaccine but that a replacement vaccine should not be expected for some time.)

#### Influenza Surveillance

An influenza surveillance summary was presented to the Committee. It was noted that both A/Victoria and A/Texas strains are circulating worldwide but are expressing themselves essentially only as sporadic cases. A/Victoria variants have been reported in Australia, New Zealand, Taiwan, Singapore, and Argentina; and A/Texas strains have been identified in Thailand, the Marshall Islands, Chili, the Panama Canal Zone, Trinidad, and Canada (British Columbia). No new strains have been identified anywhere in the world. Antibody surveys of premarital serum specimens in the United States indicate hemagglutination inhibition (HI) antibody titer of 1:40 or greater in 20-25% of the population against A/Victoria, but in only 6% against A/Texas.

In view of the Committee's concerted efforts, it was possible to conclude the meeting on Thursday, October 6, 1977, at 5:00 p.m. However, there was insufficient time to review the update draft on Immune Serum Globulin prophylaxis of hepatitis. This draft statement will be considered by correspondence during the next 1-2 weeks.

The next Committee dates have not been set. A winter meeting may not be necessary. It was recommended that at the spring meeting the Measles Vaccine recommendation be updated to incorporate material from Measles Outbreak Control.

I hereby certify that, to the best of my knowledge, the foregoing summary of minutes is accurate and complete.

tive Secretary

10/18/77

Date